

# SIKKIM



**GOVERNMENT**

**GAZETTE**

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**Wednesday 11<sup>th</sup> October, 2017**

**No. 479**

**GOVERNMENT OF SIKKIM  
DEPARTMENT OF HEALTH CARE, HUMAN SERVICES AND FAMILY WELFARE  
TASHILING SECRETARIAT, GANGTOK**

**No. 78/HC-HS&FW/2017**

**Dated: 19.09.2017**

**NOTIFICATION**

The draft of certain rules which the State Government proposes to make in exercise of the powers conferred by sub-section (1) of section 31 of the Sikkim Nurses, Midwives and Health Visitors Act, 2008 (4 of 2008) is hereby published as required by that sub-section of that section of the said Act for the information of all persons likely to be affected thereby and notice is hereby given that the said draft rules would be taken into consideration after expiry of a period of 45 (forty five) days from the date on which the notification is published in the Official Gazette.

Any objection or suggestions which may be received from any person with respect to the said draft before the expiry of the period so specified will be considered by the State Government.

**DRAFT RULES**

**PART: I – GENERAL**

- |   |           |  |
|---|-----------|--|
| <b>Short title,<br/>extent and<br/>commencement</b> | <b>1.</b> | <p>(1). These rules may be called the Sikkim Nurses, Midwives and Health Visitors Rules, 2017.</p> <p>(2). They shall extend to the whole of Sikkim.</p> <p>(3). They shall come into force on the date of their publication in the Official Gazette.</p>  |
| <b>Definitions</b>                                  | <b>2.</b> | <p>In these rules, unless the context otherwise requires: -</p> <p>(a) "Act" means the Sikkim Nurses, Midwives and Health visitors Act, 2008;</p> <p>(b) "Auxiliary Nurse- Midwife" or "Female Health Worker" means a person who possesses a certificate of Auxiliary Nurse - Midwife or Female Health Worker from a recognized institution registered under section 15;</p> |

- (c) "Council" means the 'Sikkim Nursing Council' constituted under section 3;
- (d) "Deputy Registrar" means the Deputy Registrar appointed under sub-section (6) of section 3 of the Act;
- (e) "Form" means the forms appended to these rules;
- (f) "Licensing Authority" means the Licensing Authority as referred in clause (g) of section 3.
- (g) "Nurse" means a person who possesses certificates in nursing and midwifery from an institution recognized in this behalf and registered with the Council;
- (h) "President" means the President of Sikkim Nursing Council elected under sub-sections (3) and (4) of section 3 of the Act;
- (i) "Registrar" means the Registrar appointed under sub-section (6) of section 3 of the Act;
- (j) "register" means a register maintained under section 14;
- (k) "registered" means registered in accordance with the provisions of section 15;
- (l) "Schedule" means the Schedule appended to these rules;
- (m) "section" means a section of the Act;
- (n) "Vice President" means the Vice President of Sikkim Nursing Council elected under sub-sections (3) and (4) of section 3 of the Act;

## **PART: II – ELECTION TO COUNCIL**

### **Election to the Council**

3. All election to the Council shall be conducted as follows:-
  - (1) In the case of elections to the Council by the constituencies referred to in sub-clauses (ii), (iii) and (iv) of clause (b) of sub-section (2) of section 3 of the Act, the Registrar shall have a roll prepared for each constituency at least 4 (four) months before the date of expiry, of all those entitled to vote there at.
  - (2) The election shall be held ordinarily at the office of the Council or at such venue as may be notified by the Council.
  - (3) Registrar shall be the Returning Officer for the purpose of election. In absence of Registrar, the Deputy Registrar shall be the Returning Officer and in her/his absence an officer duly nominated by the Council.
  - (4) The election shall be held by a secret ballot or through registered post.
  - (5) The nomination paper and the ballot paper shall be prepared by the Returning Officer and forwarded to all the members of the Council along with the notice of the election.

- (6) The President shall have the authority to correct the roll by adding, altering or omitting names if it is brought to her notice by proper evidence that such addition or omission of names is necessary in the rolls already made or that the names so published require any alteration in the manner specified in the application:

Provided that no name shall be omitted unless the person concerned has been heard in that behalf.

- (7) The Returning Officer shall notify in the notice board at the office of the Council, the last date for the;
- (a). filing of nominations which shall be the date not later than 60 (sixty) days before the date fixed for the counting of votes;
  - (b). scrutiny of nominations which shall be the third or fourth day from the date of making nominations;
  - (c). withdrawal of candidatures which shall be the third or fourth day after the date for the scrutiny of nominations;
  - (d). receipt of the voting papers;
  - (e). counting of votes.
- (8) Every person whose name is entered in the electoral roll prepared and published under sub-rule (16) shall, unless disqualified under section 8 of Act the 2008, be qualified to be elected as a member under clause (b) of sub-section (2) of section 3 of the Act from the constituency to which the electoral roll relates.
- (9) The nomination paper shall be in **Form – A**. No elector shall propose or second the nomination of more candidates than are required to fill up the vacancy or vacancies.
- (10) The candidate shall sign the nomination paper declaring that she/he is willing to serve the Council if elected. In the absence of such declaration the nomination shall be treated as invalid.
- (11) The candidate shall send to the Returning Officer by post the nomination paper duly signed and completed so as to reach the Returning Officer on or before the last date fixed for nomination up to 12 O'clock in the noon. Any nomination paper which is not received by the Returning officer on or before the aforesaid date and time shall be rejected.
- (12) Every candidate shall, along with the proposal for nomination, deposit with the Returning Officer a sum of rupees 50/- (fifty) by cheque in favour of Sikkim Nursing Council. A nomination paper not accompanied by such deposit shall not be accepted by the Returning Officer.

- (13) On completion of the scrutiny of nominations and after the expiry of the period within which the candidate may withdraw his candidature under sub-rule (14), the Returning Officer shall forthwith declare the names of the candidates whose nomination papers are held valid by him/ her.
- (14) Any candidate may withdraw his candidature by sending a notice in writing signed by him to the Returning Officer not later than 12 noon on the day fixed for the withdrawal.
- (15) If on the scrutiny of the nomination papers received, the Returning Officer finds that the number of valid nominations is equal to the number of members to be elected, he shall forthwith declare all such candidates to be elected to fill those seats.
- (16) If the number of valid nominations is more than the number of the members to be elected, the Returning Officer shall forthwith publish their names and addresses in such manner as the Council may deem fit and shall further cause their names to be entered in the voting papers in **Form – B**
- (17) After the candidates have been validly nominated the Returning Officer shall send by post to each elector a voting paper.
- (18) Every elector, desirous of voting, shall send his voting paper to the Returning Officer before the time fixed for the receipt of voting papers. The Returning Officer shall keep the voting papers collected in sealed boxes,

Provided that any voting paper is not received by the Returning Officer before the time so fixed shall be rejected.
- (19) Any candidate may be present either in person or by his accredited representative at the counting of votes.
- (20) When the counting of votes has been completed, the Returning Officer shall forthwith declare the candidate or candidates, as the case may be, to whom the largest number of votes has been given, to have been elected and shall forthwith inform the successful candidate by letter of his having been elected to the Council.
- (21) When an equality of votes is found to exist between any candidates, and the addition of vote will entitle anyone or more of the candidates to be declared elected, the determination of the candidate or candidates to whom such additional vote shall be deemed to have been given shall be made by lot to be drawn by the Returning Officer in the presence of the candidates or their representatives who may be present at the time of counting of votes.
- (22) After the declaration of the result of the election and after the receipt of the result of such election from the Returning Officer, the President shall forward such result to the State

Government for publication in the Official Gazette. (23) All records relating to the election shall be kept in the custody of the Registrar in the office of the Council for the period of six months and thereafter causes them to be destroyed. Provided that if there is any litigation pending after the period of six (6) months from the date of election in that event the records should not be destroyed till the completion of the litigation in court.

**Election of  
Members of the  
Council**

4. (1) The election of the members of Council under sub-clause (i) of clause (b) of sub-section (2) of section-3 of the Act shall be from the following nurses registered in the register of Sikkim Nursing Council:-
  - (i) Staff Nurse (M/F)
  - (ii) ANM
  - (iii) LHV
- (2) Members under sub-clauses (ii), (iii), (iv), (v), (vi), (vii) of clause (b) of sub-section (2) of section 3 of the Act shall be nominated from the following organizations of Sikkim:-
  - (i) Two persons from amongst the Matron and Nursing Superintendent of the affiliated institution.
  - (ii) One teaching faculty from College of Nursing
  - (iii) One sister tutor from affiliated Nursing School
  - (iv) One person from Sikkim Medical Council
  - (v) One person from state branch of Indian Medical Association
  - (vi) One person from Sikkim Nurses Association

**Election of  
President and  
Vice – President**

5. The President and the Vice President of the Council shall be elected from amongst the members of the Nursing Council, as under: -
  - (1) The election of the President or the Vice-President shall be held at a meeting specially convened for that purpose for which due notice has to be given in accordance with these rules.
  - (2) The nominations for the post of President and Vice-President shall be proposed by a member of Nursing Council and seconded by any other member of the Council.
  - (3) The meeting for the election of the President shall be presided over by the Vice-President: Provided that, if the Vice-President is himself/herself standing for election, or if there is no Vice-President, or if he/she is absent, the members present shall choose amongst themselves a person other than a candidate for election to preside over the meeting.

- (4) The names of the candidate who are duly proposed and seconded shall be read out to the members by the person presiding and the wishes of the candidates shall be ascertained whether any of them would withdraw from the contest. The person presiding shall thereafter put the names of candidates who have not withdrawn to vote.
- (5) If two or more candidates obtain an equal number of votes, the Chairman presiding the meeting shall decide between the candidates by drawing lots in the presence of all the members of the Council who may attend, after due notice to be present for the purpose.

**Casual Vacancies** 6. When any vacancy occurs in the office of a member of the Council from any of the constituencies referred to in clause (b) or in clause (c) of sub-section (2) of Section 3, it shall be filled up as soon as conveniently may be by the election or nomination of a member as the case may be.

### **PART: III - REGISTRATION**

- Maintenance of registers by the Council,**
7. (1). The Council shall maintain the registers which shall be divided into different parts in accordance with the courses prescribed by the Sikkim Nursing Council.
    - (a). **Part – A:** (i). Register for the candidates who have undergone such courses of training and pass such examination and hold recognized certificates approved by the Council as nurse and midwife shall maintain in Form No. I.
      - (ii) Register for nurses who have undergone training in General Nursing shall maintain in Form No. II.
      - (iii) Register for candidates who have undergone such training and pass such examination and hold a recognized certificate approved by the Council as midwives/specialty in lieu of midwifery shall maintain in Form No. III.
    - (b). **Part – B:** Register for candidates who have undergone such courses of training and pass such examination and hold a recognized certificates approved by the council as Auxiliary Nurse-Midwives/ multipurpose health worker female / female health assistant shall maintained in Form No. IV.
    - (c). **Part – C:** (i) Register for unqualified practicing nurse who have undergone training and hold qualification that are not in accordance with the courses prescribed by the Sikkim Nursing Council /Indian Nursing Council is maintain in Form No. V.
      - (ii) The entry of the nurses in the register of list shall be made on making applications in Form – C.
  - (2). After making entries in the register, the registration certificates shall be given in the Form E and F.

**Admission to the Register.**

8. (1). Every person who makes an application to the Register in Form C for admission to the part of the Register and who complies with the rules framed in this behalf and procedure shall furnish before the Registrar a certificate in the form laid down under bye-laws from an approved training institution, signed by the Nursing Superintendent/Principal or other responsible Officer stating that such person has satisfactorily completed and passed the prescribed course of training and may be admitted to such part of the Register. The applications shall be accompanied by a fee as follow:-
- (a). Auxiliary Nurse Midwife / Multipurpose Health worker Female = Rs. 1000/- (Rupees one thousand only)
  - (b). Registered Nurse/Registered Midwife = Rs. 1500/- (Rupees fifteen hundred only).
  - (c). For Recording additional or higher qualification Rs.300/- (Rupees three hundred only).
  - (d). For Reciprocal Registration = Rs. 2000/- (Rupees two thousand only).
- (2) Persons who have been trained and registered in any State of India with which the council has entered into appropriate part of the Register on their fulfilling such conditions as may be laid down in bye-laws, on payment of fees payable under sub-rule (1) of rule 8.
- (3) Notwithstanding anything contained in this rule, persons who have been trained, prior to the establishment of a statutory council in any of the States in India or in any council with which the council has entered into an agreement for reciprocal registration may be admitted by the Council to any part of the register on their fulfilling such conditions as may be considered appropriate by the Council and merits of each individual case.
- (4) The names of the Nurse/Midwife, Auxiliary Nurse-Midwife and Health Assistant Female shall be entered in the register in the order in which the applications for registration are admitted and sufficient space shall be left for future additions or alterations in the qualifications and address of each entry.
- (5) Each page of the register shall be verified by the Registrar's signature.
- (6) (a). Candidate on admission in any of the affiliated educational institutions for any course shall apply to the Registrar through the Principal in the prescribed Form D together with the fee of Rs.200/-(two hundred) only for the course of ANM and Rs. 500/- (five hundred) only for the course of GNM within 1 (one) month of admission.

- (b). On registration every student will be allotted a student registration number which shall be quoted in all the application forms and in all correspondence regarding the student.
  - (c). The Registrar shall maintain a Register of students registered. No student other than a registered student shall be eligible to sit in any examination held by the Council.
- (7) B. Sc (Nursing) generic candidate shall apply for registration in Form No. 1 and pay the fee of Rs. 2000/- (Rupees two thousand only).
  - (8) In the event of a certificate being lost or accidentally destroyed, the holder of the certificate may at any time during which such certificate is in force, apply to the Registrar for a fresh certificate and the Registrar may, if he thinks fit, on satisfactory proof as to the identity of the Applicant, grant such certificate on payment of a fee of Rs.500/- (Rupees Five Hundred) only. A certificate issued under this sub - rule shall be marked as "duplicate".
  - (9) Any person who desire to be registered temporarily under clause (b) of sub-section (2) of Section 11 of Indian Nursing Council Act, 1947 shall apply to the Registrar in the prescribed Form to be obtained from the Registrar on request.
  - (10) The person not being a citizen of India, who is employed or wished to be employed as Nurse, teacher or administrator anywhere in the State with the approval of the Council may be enrolled temporarily in the State Register for such period as may be specified in this behalf in the order issued by the President under clause (b) of sub-section (2) of Section 11 of Indian Nursing Council Act, 1947. Provided that the practice by such person shall be limited to the State to which she/he is attached.

**Change of  
Addresses**

9. Every registered person shall immediately give notice to the Registrar for any change of name or change of permanent address and the Registrar shall amend the Register accordingly. Along with the notice of change of name shall be forwarded documentary evidence in support of the change for recording the change of name in the Register.

**Renewal of  
Registration**

10. (1). All categories of Registered Nurses under Sikkim Nursing Council are entitled to renew their Registration Certificate on payment of renewal fees as specified under section 18. The Registered Nursing Personnel who are not in service will also renew their certificate from State Nursing Council (SNC) provided a declaration from the incumbent (through Affidavit by First Class Magistrate) showing the reason of non-employment should be submitted at the time of Renewal of Registration.



- (2) Renewal fee payable under section 18 shall be amended from Rs. 100 (one hundred) to Rs. 500/- (five hundred only) for RN/RM and Lady Health Assistant (F) and Rs. 300/- (three hundred) for ANM/MPHW (F) every three years. The Council shall amend the renewal fee time to time.
- (3) Late Fee of Rs. 50/- (fifty) may be charged if he/she failed to renew his/her Registration within 3 (three) months from the Date of Validity. After completion of 3 (three) months, additional fees of Rs.50/- (Rupees Fifty) only per month by Demand Draft/ Pay Order from State Bank of Sikkim in favour of Sikkim Nursing Council will be charged.
- (4) If employed in any Government Sector, employer certificate is not necessary. If employed in Non-Government Sector he/she shall submit current employer certificate on the day of Renewal and shall be present physically.
- (5) On the day of renewal of Registration all candidates shall have to be present physically if the authority desires renewal of registration in lot/bunch through their approved representative, there is no need to be present personally.
- (6) On attaining the age above "60" (sixty) years candidates shall have to be physically present in the office of Sikkim Nursing Council before renewal of Registration and may be permitted for renewal of registration, if found otherwise suitable by producing Medical Fitness Certificate from Registered Medical Practitioner of any Government Sector.
- (7) The Candidates, who are working in Abroad may renew their Registration Certificate if the rules of Overseas Verification of Sikkim Nursing Council specified in rule 12 fulfils and the registration will be renewed after receiving proper and authentic letter from appointing authority in abroad for renewal of Registration.
- (8) In case of renewal of Reciprocal Registration, candidates shall produce required documents of Reciprocal Registration of other State. He/she may renew his/her Registration Certificate after full satisfaction of Sikkim Nursing Council.
- (9) If any candidate and employee of All India Services desire renewal of registration, he/she shall produce his/her authentic documents at the time of Renewal of Registration.
- (10) Application for renewal of registration shall be submitted in Form-G.
- (11) Requisition for Renewal of Registration:
  - (a) Acquisition of thirty (30) CREDIT HOURS per year i.e. 150 Hours in five years gained by means of attending continuing education programs and workshops.

- (b) Submission of true attested copy of certificates of continuing education programs or workshops attended.
- (c) Demand draft of Rs. 500/- (Rupees Five Hundred) only for Staff Nurse (M/ F) and Rs. 300/- (Rupees Three Hundred) only for ANM/MPHW (F) in favor of Sikkim Nursing Council, payable at State Bank of Sikkim.
- (d) Submission of proof of being employed in Sikkim since last 1 (one) year.
- (e) Applicants must bring all original certificates along with attested photocopies of all the documents at the time of Registration.
- (f) Three recent frontal view passport size photographs on white background with hair tied neatly at the back.
- (g) Photocopies (duly attested) of 10<sup>th</sup> and 12<sup>th</sup> class certificate and mark sheets.
- (h) Photocopies (duly attested) of mark sheets of all three/ four years examination issued by council/ Exam Board/ Universities.
- (i) Photocopy (duly attested) of diploma certificate/degree from Examination Board/ Nursing Council/ University.
- (j) Duly attested photocopy (front & back) of registration certificate with Sikkim Nursing Council.
- (k) Filled up Renewal Form.

**Verification/ NOC  
for Registration  
with other State  
Councils**

11. (1). An application addressed to Registrar of the Sikkim Nursing Council should be submitted on a plain paper quoting the applicant's address, telephone numbers and Registration Number of Sikkim Council. The application should be attached with; -
  - (a) Original copy of Registration Certificate of Sikkim Nursing Council.
  - (b) Demand Draft of Rs. 250/- (Rupees Two Hundred and Fifty) drawn in favor of Sikkim Nursing Council as a processing fee for Verification / NOC.
- (2). The Council will issue receipt for payment of fee on submission of application by applicant and within 15 (fifteen) to 30 (thirty) days, the Council will issue the letter of verification/NOC for registration with other respective Council. The candidate or representative of the candidate with letter of authority within or after 15 (fifteen) to 30 (thirty) days can collect candidate's own copy in the sealed envelope if so desired. The NOC will be sent to the respective councils by speed post. The council shall not be responsible for any delay, damage, loss in postal transition of the sealed envelope.

**Verification of the  
Registration for  
Sending to  
Overseas  
Licensing /and /or  
Registration  
Councils**

12. (1). An application addressed to registrar of the Sikkim Nursing Council should be submitted on a plain paper quoting the applicant's address, telephone numbers and Registration Number of Sikkim Nursing Council. The application should be attached with duly attested photocopies of the following documents –
- (a). X<sup>th</sup> and XII<sup>th</sup> Board Certificate having candidate's name, Father's Name and Date of Birth.
  - (b). Registration certificate, Diploma certificate, Degree (Both Side).
  - (c). Mark Sheet of GNM/ B. Sc Nursing.
  - (d). Registration certificates issued by Sikkim Nursing Council.
  - (e). Marriage Certificate, if any/ office order / copy of voter card/ Government Office Order/ affidavit on stamp paper of Rupees Twenty attested by notary.
  - (f). Character certificate issued from the employer.
  - (g). Experience certificate from the employer.
  - (h). Two recent frontal view passport size photographs on white background with hair tied neatly at the back.
  - (i). Payment of verification fee in Demand Draft equivalent to Fifty Dollar as applicable.
- (2). The council will issue receipt on submission of application to the applicant and within fifteen to thirty days, the council will issue the letter of verification for the respective overseas body/organization. The letter of verification or good standing certificate shall be sent by speed post after Fifteen to Thirty days to the respective overseas body/organization or the applicant or representative of the applicant with letter of authority can collect the sealed envelope if desired so. The sealed envelope without tampering should be sent to the addressee by the applicant. The council shall not be responsible for delay, damage or loss in postal transition of the sealed envelope.

**Refusal of  
registration**

13. (1). The Council may direct that the name of any registered person who has been convicted of a cognizable offence as defined in the Code of Criminal Procedure 1973, which discloses such defects of moral character as in the opinion of the Council, sufficient to make him unfit to practice his profession or who after due enquiry has been found guilty of misconduct, shall be removed from the register.
- (2) When the registration of the name of any person is refused, or when the name of any registered person is removed from the Register in accordance with the provisions of the

preceding rules, the Registrar shall forthwith send notice of such refusal or removal to the person, by a registered letter addressed to his last known address. The Registrar shall also send forthwith intimation of any such refusal or removal to the body or bodies from whom the said person received his/her qualification and shall request it or them not to admit him/her without previous reference to the Council to any examination for any new qualification which needs registration in the Register.

- (3) When the name is removed from the register, the Registrar shall issue a notification in the Official Gazette announcing the removal.

**Registration and  
re-entry of name**

14. (1) The Council may, on sufficient cause being shown, direct that the name of the person shall be registered or re-entered in the register. The provisions of rules 14 and 15 shall mutatis mutandis apply to the list.

**PART: IV**

**PERSONS ENTITLED TO PRACTISE AND CONTROL OF LICENSING AUTHORITIES**

**Nurses, Auxiliary  
Nurse Midwife,  
Female Health  
Visitors/ Health  
Assistant entitled  
to practice &  
Licensing and  
Supervision**

15. (1) Any person who are not registered or not in the list shall not practise or be employed as a Nurse, Auxiliary Nurse Midwife or Health Assistant Female in any nursing institution, firm or hospital under sub-section (1) of section 20.
- (2) A person whose name has been entered in the list and who desires to practise as a nurse, midwife, auxiliary nurse-midwife or health visitor in the area referred to in section 19 shall not be permitted to practise under sub-section (1) of section 20, as a nurse, midwife, auxiliary nurse, midwife or health visitor, unless she produces a certificate from a institution signed by the Matron, Medical Superintendent or other responsible Officer of such institution that she has received the training as a nurse, midwife, auxiliary nurse-midwife or health visitor, as the case may be.

**Supervision of  
registered  
persons and  
persons on the  
list**

16. (1) Subject to the provisions of section 22 of the Act, every licensing authority shall exercise general supervisions and control as may be notified by the State Government under clause (g) of section 2 of the Act. The licensing authority may delegate any of its power to such officer as may be authorized in this regard.
- (2). A Licensing Authority shall exercise general supervision over all persons whose names are registered in the Register or are included in the list, and who practise within the area of its jurisdiction in accordance with the bye-laws made by the Council.
- (3). For the purpose and within the meaning under Section 22 of the Act, Licensing Authority shall exercise general supervision

and control over nursing establishments, clinics, nursing institutions and the Authority shall be in the post of Joint Director and above of the Sikkim State Nursing Service in the Department of Health Care, Human Services and Family Welfare, Government of Sikkim and for individual nurse, the registered body of Sikkim Nursing Council.

- (4). Every licensing authority shall:-
- (a). maintain a roll containing the names and addresses of registered persons and of the persons whose names are included in the list, who practise within the area of its jurisdiction collected up to 31st December each year and keep a copy of the roll accessible at all reasonable times for public inspection;
  - (b). report at once to the Council the name of any registered person and of a person whose name is included in the List, practising within the area of its jurisdiction who has been convicted of any offence bring to the notice of the Council any complaints of malpractice, negligence or misconduct on the part of any such persons;
  - (c). afford the Council every assistance in the investigation of charges of malpractices, negligence or misconduct on the part of any such person;
  - (d). report the Council, in the first week of every month, the death or any changes in the name or address of any of such person, during the preceding month.
- (5) Whenever the licensing authority receives a notice under section 23 of Act from any person of his intention to practise, the licensing authority shall satisfy itself that the applicant is a registered person or a person whose name is included in the List and shall enter his name in the roll to be maintained under sub rule (1) of rule 8.

#### **PART: V – NURSES ESTABLISHMENTS**

##### **Nurses Establishments**

17. (1) An application for a license to carry on a Nurses Establishment for the supply of nurses shall be made in writing and shall be sent by registered post to the licensing authority (State Nursing Council) of the area. It shall be accompanied by a fee of **Rupees 10000/- (ten thousand) for ANM/GNM program and Rupees 20,000/- (twenty thousand) for B.Sc.(N)/M.Sc.(N)/PC. B.Sc.(N)** on Demand Draft/Pay Order from State Bank of Sikkim in favor of "Sikkim Nursing Council" payable at Gangtok.
- (2) An application for a license by a Nurses Establishment already in existence shall be made within 2 (two) months from the date on which these rules come into force.

- (3) An application for the renewal of a license shall be made not less than 2 (two) months before the date on which the license is due to expire.
- (4) The applicant shall furnish to the Licensing Authority such further information in his possession as the licensing authority may require in respect of the Nurses Establishment.

**PART: VI – MISCELLANEOUS**

**Fees**

- 17. The fees payable in respect of an appeal to the State Government under Section 17, Section 24(5), or section 26 shall be rupees 500/- (five hundred only).

**DR. KUMAR BHANDARI, MD, DM**  
**Director General cum Secretary**  
**Department of Health Care, HS & FW**  
**Government of Sikkim**

**FORM 'A'**  
**(Sub-rule (9) of Rule 3)**  
**Nomination Paper**

1	Name of the Candidate in full (as appearing in the Electoral Roll).	
2	Serial No. of the Candidate on the Electoral Roll	
3	Address of the Candidate	
4	Name and Serial No. on the Electoral Roll of the Proposer	
5	Name and Serial No. on the Electoral Roll of the Secunder	

.....

**Signature of the Proposer**

.....

**Signature of the Secunder**

**Declaration by the Candidate**

I declare that I am willing to serve on the Council if elected.

.....

**Signature of the Candidate**

N.B:

- (1) Nomination papers which are not received on or before by the Returning Officer, will be invalid.
- (2) The nominee should pay a sum of Rs. 50/- by Cash or Money Order to the Returning Officer, which should reach the Returning Officer on or before

Received on ..... at .....

.....

**Returning**

**Officer**

**FORM 'B'**  
**[Sub-rule (16) of Rule 3]**  
**Voting Paper**

Register Number or Election by .....

Name of the Constituency .....

Sl. No.	Name of Candidate	Vote
1		
2		
3		
4		

.....  
**Signature of the Returning Officer**

**Instructions:-**

1. Number of vacancies to be filled are .....
2. Place 'X' mark opposite the name of the candidates whom you wish to vote.
3. Every Elector shall send his individual voting paper directed to the Returning Officer.
4. Voting papers will be invalid if:-
  - (a) Voting paper does not bear Returning Officer's signature or facsimile signature.
  - (b) The voter signs his name or writes a word or make marks on it by which it becomes recognizable as his voting paper.
  - (c) Number of votes recorded thereon exceeds the number of vacancies to be filled.
  - (d) Number of votes recorded thereon are less than the number of vacancies to be filled.
  - (e) If the Returning Officer receives more than one voting paper from the same voter, all such voting papers shall be treated as invalid.
5. The elector shall enclose the voting paper duly filled in, in the smaller cover and enclose that cover in bigger cover supplied by the Returning Officer and shall, write his full name (which may be typewritten) and signature in the left hand corner of the bigger envelopes in the printed columns thereof. If the Elector fails to write his full name and signature the voting paper shall be invalid.



**FORM – C [See sub- clause (ii) of clause (c) of sub-rule (1) of rule 7]**

Entries relating to name and address shall be written in **BLOCK LETTERS**

1. Applicant's Full Name: .....
2. Father's Name: .....
3. Mother's Name: .....
4. Husband's Name (if married):.....
5. Gender : ☐ Female ☐ Male 6. Marital Status: ☐ Single ☐ Married
7. Date and Place of birth : ...../...../....., .....  
(Attach copy of valid age proof)
8. Nationality: .....
9. Present Address : .....
10. Permanent Address :.....
11. Email Id: .....
12. General Qualification: .....
13. Name & Address of the Institution where Nursing Education was obtained: .....  
.....
14. Year of Joining: ..... 15. Year of Completion .....
16. Program of study completed (B.Sc.N/ GNM/ MPHw (F/ANM)): .....
17. Type of Registration require: Temporary ☐ Reciprocal Registration ☐  
17.1. Name and Address of the Examining Body: .....  
.....  
17.2 Date of Qualifying Examination: ...../...../..... (DD/MM/ YY). Roll No.: .....  
17.3 Name of the Nursing Registration Council with which registered already.....  
.....  
17.4 Registration No. RN/RM .....Date of Removal from register (if any).....
18. Registration Fee Paid by Cash/ DD No. ....for Rs. ....

I hereby declare that the information given above is true to the best of my knowledge and that there are no instances of adverse professional conduct against me that could render me ineligible for registration as Staff Nurse (M/ F)/ MPHw (F)/ LHV with Sikkim Nursing Council.

Date: ..... Place: ..... Signature of Applicant: .....

**Certificate of Attestation**

We certify that we are personally acquainted with Ms/ Mr. ....

D/O, W/O, S/O ..... whose photograph is attested &  
affixed on this form. She/he undertook a program of nursing studies at .....  
she/he passed the (B.Sc.Nursing/GNM/ MPHw (F)/ANM) .....  
Examination in the Year ..... and as per records, she/he bears a good moral  
character.

Name of Principal/ Nursing Superintendent/ Employer .....

Signature (with seal): .....

**For Office Use Only**

-----

Application Checked By: .....

Registration fee paid Vide receipt No. .... Date: ...../...../.....

Registration Number Allotted: .....

Date: ..... Place: .....

Signature of Registrar

Date :

**FORM – D [See rule 8 (6)]**  
**APPLICATION FORM FOR STUDENT REGISTRATION**  
**Admitted to recognised/ approved Institution**

GNM (Revised) ☐ / ANM (Revised) ☐

(Tick "mark in appropriate box)

**(To be filled up by the candidate only)**

1. Name of the student (in full) [Block Letters]: .....

2. Address :

(a) Permanent [in Block Letter]: .....  
(With Pin Code No.) .....

(b) Present: [in Block Letters]: .....

3. (a) Father's Name (in full) : .....

(b) Husband's Name (in full):.....

(c) Guardian's Name and Relationship: .....

4. Date of Birth & Place:

Date	Month	Year	Place

5. Cast: ..... S.T/S.C/OBC/OTHER

6. Name of the institution: .....

7. Preliminary Educational Qualification :

(NOTE: mention examination passed name of the Board & Year of Passing)

**(Board verification list must be submitted at the time of submission of Student Registration Form)**

Signature of the Sister Tutor

Signature of the applicant full

I hereby certify that the above particulars are true to my knowledge.

Date :

Signature of the Head of the Institution  
(Office seal)

**\*Strike out which is not applicable.**

**NOTE : One Xerox Copy** of the School Final/ Madhyamik/ Higher Secondary Admit Card **AND** Mark-Sheet (for HS) should be attached with this form/ in case of Delhi Board submit Father's Name/ Date of Birth mentioned any document. Signature should not be CAPITAL LETTERS.

**FOR OFFICE USE ONLY**

Received Rs..... Vide R. No. .... Date.....

**FORM – E**  
[See sub-rule (2) of rule 7]  
**THE SIKKIM NURSING COUNCIL**

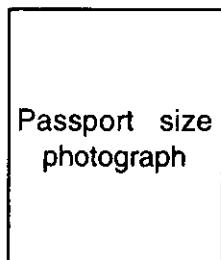


**CERTIFICATION OF REGISTRATION**

This is to certify that Ms. ....D/O, /W/O,  
Mr..... has taken a Program of Study for Auxiliary Nurse  
Midwives at ..... from ..... to  
..... and has passed a prescribed examination of Auxiliary Nurse  
Midwives conducted by Sikkim Nursing Council in ..... and is admitted in the  
ANM Register maintained under the provision of Sikkim Nurses, Midwives and Health Visitors  
Act, 2008 (SNC sub-rules (b) of rules 7 of Part III) and that she is entitled to take and use the  
title of **“REGISTERED AUXILIARY NURSE MIDWIVES”**.

The number assigned to her in the Register is: .....

Dated: ...../...../.....



**PRESIDENT SNC**

**REGISTRAR SNC**

**N.B. Registration should be renewed after every FIVE YEARS**  
**(Kindly do not laminate the certificate)**

**FORM – F**  
[See sub-rule (2) of rule 7]  
**THE SIKKIM NURSING COUNCIL**



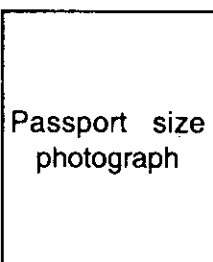
**CERTIFICATION OF REGISTRATION**

This is to certify that Ms./Mr. ....S/O, D/O, W/O,  
Mr..... has taken a Program of Study for General Nursing  
and Midwifery at ..... from ..... to  
..... and has passed a prescribed examination of General Nursing and  
Midwifery conducted by Sikkim Nursing Council in ..... and is admitted in the  
Nurses and Midwives Register maintained under the provision of Sikkim Nurses, Midwives and  
Health Visitors Act, 2008 (SNC sub-rule (a) of rule 8 of Part III) and that she is entitled to take  
and use the title of **“REGISTERED NURSE and REGISTERED MIDWIFE”**.

The number assigned to him/her in the Register as a Nurse is: .....

The number assigned to him/her in the Register as a Midwife is: .....

Dated: ...../...../.....



**PRESIDENT SNC**

**REGISTRAR SNC**

**N.B. Registration should be renewed after every FIVE YEARS**  
**(Kindly do not laminate the certificate)**

Passport size  
photograph  
attested by any  
Gazetted Officer/  
Nursing

# FORM – G

[See sub-rule (10) of rule 10]

## APPLICATION FORM FOR RENEWAL OF REGISTRATION

- Name of the Candidate (in Block Letters) : .....
- (a) Father's Name : .....  
(b) Husband's Name : .....
- Age with Date of Birth : 

--

--	--	--

  
DD MM YYYY
- Address with Pin code  
a) Present: .....  
b) Permanent with Pin Code.....
- Professional Qualification: .....
- Registration Number & Date of Nursing Certificates: ANM(Old/Revised)GNM(old/Revised)  
B.Sc.(NG) .....
- a) Present Place of Posting: .....  
(Name with Address) .....  
b) Present & Last Place of Posting: .....  
(Name &Address) .....
- Whether belongs to General/SC/ST/OBC : .....
- Any discontinuation in Service (if Yes, mentioned the period of Discontinuation in Service):  
Yes/No .....
- Professional Misconduct: Yes/No  
(Court Case)
- Demand Draft No./ Pay Order No. with Date :
- If renewed previously, give details :

RR No.	Date of Renewed	Date of Validity	Remarks

.....  
(Full Signature of the Candidate with Date)  
& Mobile No.....

.....  
(Registrar, Sikkim Nursing Council)

FORM – H

[See clause (c) sub-rule (1) of rule 8]

SERIAL NO.....

APPLICATION FORM FOR ADDITIONAL QUALIFICATION

1. Name in full (Block Letters).....
2. Father's Name.....
3. Date of Birth..... Place of Birth.....
4. Permanent address in full.....
5. Working at.....
6. Name of the Training Institution.....
7. Period of Training Institution.....
8. Name of the University.....
9. Additional Course Name.....
10. S.N.C. Registration No. & Date: .....
11. The prescribed fee of Rupees.....is paid herewith.

Requirements:-

1. Fees: - Rs. 300/- by Demand Draft/Bank cheque
2. Original Certificate, (GNM/ANM)/ both side Xerox attested copy of Sikkim Nursing Council Registration Certificate.
3. Attested Copy of additional qualification Certificate.

Note:- Cash counter will be closed at 3:00 PM

Dated; ...../...../20.....

.....  
Signature of the Applicant in full  
With Mobile No.....

.....  
Signature & Seal of Head of the Department

FOR OFFICE USE ONLY

Received Rupees.....(Rupees.....only)

Vide DD. No/ Cheque No. ....Dated.....

**CASHIER**  
**SIKKIM NURSING COUNCIL**

**FORM – I [See rule 8 (7)]**  
**APPLICATION FOR REGISTRATION UNDER SECTION – 15 OF THE SIKKIM NURSES;**  
**MIDWIVES AND HEALTH VISITORS ACT 2008**  
**REGISTRATION FORM FOR B.SC.( NURSING ) GENERIC CANDIDATES**

I..... (NAME IN CAPITAL LETTERS) hereby apply to be admitted to the Register of NURSE MIDWIFE under Section 15 of The Sikkim Nurses, Midwives and Health Visitors Act, 2008.

The following particulars regarding myself and qualification are given below;

1. NAME ( in Block Letters) .....
2. FATHER'S NAME.....
3. DATE OF BIRTH.....
4. NATIONALITY.....
5. ADDRESS PERMANENT.....  
PRESENT.....
6. B.SC. (NURSING) COMPLETED  
AT.....
7. DEGREE OBTAINED FROM.....
8. PERIOD OF TRAINING.....
9. REGISTRATION NO. OF THE UNIVERSITY .....
10. MARITAL STATUS.....

The Original Mark Sheets/ Degree is enclosed with a copy thereof. I hereby undertake that if I am admitted to the register, I will in the practice of my profession as a SENIOR NURSE MIDWIFE observe and be bound by rules and regulations issued by the Sikkim Nursing Council so far as they affect me and that the Council shall at any time due enquiry order my name to be removed from the Register and I will return my Registration Certificate to the Registrar which may be given to me.

The prescribed Fee of Rupees.....is paid herewith.

The.....20 .....

(Signature of the applicant in full )  
Mob. No. ....

.....  
(Signature of the Principal with SEAL)

**FOR OFFICE USE ONLY**

Received Rs..... (Rupees.....only)  
Vide R/ No..... Dated.....

**CASHIER**



**SIKKIM NURSING COUNCIL**  
**INSTRUCTION FOR SUBMISSION OF REGISTRATION FORM**

- (1). Final Year (4<sup>th</sup> Year ) Mark Sheet of B.Sc. (Ng)
- (2). Xerox copy of Age proof document (Secondary Admit Card).
- (3). Two (2) copies of passport size photographs to be submitted duly attested by the Principal one on front side and other on the back side mentioning the name of the candidate.
- (4). The prescribed fee of Rs 2000/- (Rupees two thousand) to be submitted for each candidate by Cash/ by Draft in favour of Registrar Sikkim Nursing Council Payable at STATE BANK OF SIKKIM.
- (5). **Board verification list must be submitted at the time of submission of Student Registration Form.**
- (6). Candidates will collect the Registration Certificate from the office of the Principal, College of Nursing personally.
- (7). Two Xerox copies of all documents must be submitted and attested by the principal, college of Nursing.
- (8). The forms of Registration will be received up to 2 PM positively.

The registration form shall not accept without all the above mentioned documents.

**BY ORDER**

**REGISTRAR**  
**SIKKIM NURSING COUNCIL**

Serial No.

FORM – J [See rule 8 (8)]

**DIRECTIVES FOR OBTAINING A DUPLICATE CERTIFICATE**

1. The declaration form is available from the office of the Registrar, **SIKKIM NURSING COUNCIL** @Rs.30/- each. The declaration form should be filled in details by the candidates herself. N.B: The declaration form issued by the Sikkim Nursing Council will only be accepted.
2. The Candidates is then required to send the following documents through Proper channel. a) The declaration form duly countersigned by a Senior Trained registered nurse/ midwife/or D.P.H.N/ or a Medical Practitioners practising under Govt. Organisations and whose name is still borne on the registers of the respective council. b) An affidavit sworn before a 1<sup>st</sup> Class Magistrate by herself stating therein:

(i) Name : (ii) Father's Name : (iii) Name of the training school (iv) Date of passing the examination of the Council : (v) Registration Number in Full : (vi) Circumstances under which the certificate was lost : (vii) Number & Date of Diary made with the Police Station :

**(ORIGINAL AFFIDAVIT IS NOT RETURNABLE)**

3. An advertisement has to be made in the daily leading Newspaper about the loss of the Certificate and the said paper must be submitted along with the declaration form.
4. The requisite fee for duplicate Registration Certificate is Rs. 1000/- (One Thousand Only) per certificate. Fee should be submitted by cash /M.O/or by Bank Draft in favour of Registrar Sikkim Nursing Council.
5. Four passport sized photographs, duly attested (Two on front and the others on the back side) by Nursing Superintendent, or D.M.O , or B.M.O H or gazetted officer, where she is employed. Name of the candidate should be mentioned on the photographs.
6. The Duplicate Certificate shall collect by the candidate in person from the office of Sikkim Nursing Council. When all the above requirements have been fulfilled the case would then only be considered for issuance of the **"DUPLICATE CERTIFICATE"** in favour of the incumbent.

**GANGTOK, .....20**

**Registrar  
Sikkim Nursing Council**

**X.....**

**DECLARATION FORM FOR DUPLICATE CERTIFICATE**

I..... declare as follows:

That I lost my original certificate of registration as registered Nurse/ Midwife/ MPHw (F) / ANM.

That after diligent search, I have not been able to recover the lost certificate.

That I have made a diary with local police authorities, the diary number being ..... dated.....

That I am the same person who obtained the original certificate under No ..... of Sikkim Nursing Council

That I shall return the duplicate certificate for which I have applied to the Registered, Sikkim Nursing Council if get back the original later.

Signature of the applicant

HOME ADDRESS:

WHERE EMPLOYED:

I..... (Name of the countersignatory)  
hereby certify that the above statement has been made and signed in my presence, and to the best of my knowledge and behalf. The signatory is the same.....  
(Name of the applicant)

Who obtained original registration certificate under No.....

Date .....

Signature of the counter signatory  
Registration No.....

HOME ADDRESS:

WHERE EMPLOYED:

(Office Seal in case of Doctor Signatory)

#### FOR OFFICE USE

Received Rs.....Vide R. No ...../ M.O No . ....

Dated.....

photograph

Dated.....

**Sikkim Nursing Council**

**FORM NO. I**

**[See sub-clause (i) of clause (a) of sub-rule (1) of rule 7]**

**FORM FOR REGISTER FOR NURSES AND MIDWIVES**

1	2	3	4	5	6
Sl. No.	Registration Number & Date of Registration	Name	Father's/Husband's Name	Mother's Name	Date & Place of Birth
7	8	9	10	11	
Address Permanent/Postal	Nationality	Name of Institution & Period of Training	Qualification General/ Professional Basic & Higher	Employer's Name & Address	
12	13	14	15	16	
Registration No. of other States	Date of removal and if subsequently instated with date	Remarks Merits/ Rewards Certificates	Cross References in other Registers	Signature of Registrar	

**Sikkim Nursing Council**

**FORM NO. II**

**[See sub-clause (ii) of clause (a) of sub-rule (1) of rule 7]**

**FORM FOR REGISTER FOR REGISTERED NURSES UNDERGOING GENERAL NURSING TRAINING**

1	2	3	4	5	6
Sl. No.	Registration Number & Date of Registration	Name	Father's/Husband's Name	Mother's Name	Date & Place of Birth
7	8	9	10	11	
Address Permanent/Postal	Nationality	Name of Institution & Period of Training	Roll Number	Qualification General/ Professional	
12	13	14	15	16	
Date of Registration and Renewal	Date of removal and if subsequently instated with date	Cross References in other Registers	Signature of Registrar	photograph	

**Sikkim Nursing Council**

**FORM NO. III**

[See sub-clause (iii) of clause (a) of sub-rule (1) of rule 7]

**FORM FOR REGISTER FOR REGISTERED MIDWIFE/SPECIALITY IN LIEU OF  
MIDWIFERY**

1	2	3	4	5	6
Sl. No.	Registration Number & Date of Registration	Name	Father's/Husband's Name	Mother's Name	Date & Place of Birth
7	8	9	10	11	
Address Permanent/Postal	Nationality	Name of Institution & Period of Training	Qualification General/ Professional	Date of Registration and Renewal	
12	13	14			
Date of removal and if subsequently instated with date	Cross References in other Registers	Signature of Registrar			

**Sikkim Nursing Council**

**FORM NO. IV**

[See sub-clause (b) of sub-rule (1) of rule 7]

**FORM FOR REGISTER FOR ANM/FEMALE MULTIPURPOSE HEALTH WORKER/  
HEALTH SUPERVISOR/HEALTH ASSISTANT FEMALE**

1	2	3	4	5	6
Sl. No.	Registration Number & Date of Registration	Name	Father's/Husband's Name	Mother's Name	Date & Place of Birth
7	8	9	10	11	
Address Permanent/Postal	Nationality	Name of Institution & Period of Training	Qualification General/ Professional	Date of Registration and Renewal	
12	13	14	15		
Date of removal and if subsequently instated with date	Cross References in other Registers	Signature of Registrar	Photograph		

**Sikkim Nursing Council**

**FORM NO. V**

**[See sub-clause (i) of clause (b) of sub-rule (1) of rule 7]**

**FORM FOR REGISTER FOR UNQUALIFIED PRACTISING NURSES**

1	2	3	4	5	6
Sl. No.	Name	Father's/Husband's Name	Mother's Name	Date & Place of Birth	Address Permanent/ Postal
7	8	9	10		
Employees Name and Address	Remarks	Signature of Registrar	Photographs		